

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814

(916) 445-1161



October 1, 1985

CMSP LETTER 85-9

To: ALL CMSP COUNTY WELFARE DIRECTORS

**CMSP Information Notice No. 1
(formerly form CMSP 252)**

This letter transmits to you a copy of the new CMSP Information Notice No. 1 (formerly CMSP 252), entitled "Important Information About Your County Medical Services Program (CMSP) Card and Benefits". The notice has been revised to clarify the most current benefits under the CMSP, and to show the correct amounts of beneficiary copayments for prescriptions and emergencies.

Applicants for CMSP must be given a copy of this notice at the time of application and again when eligibility has been determined. This notice may also be distributed to persons who are interested in knowing the CMSP scope of benefits without making application.

The county must order an initial supply of the notice from the Department of Health Services Warehouse. The order must not exceed _____ copies. Use of the notice is to be implemented immediately upon receipt and all of the county's remaining supply of form CMSP 252 should be destroyed. All subsequent supplies of the notice will be the responsibility of your department.

Please contact Linda McFarland of the CMSP Unit at (916) 324-4203, if you have any questions concerning this notice.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Pacilio Garcia', written over a circular stamp.

Pacilio Garcia, Chief
County Medical Services Program
County Health Services Branch

Attachment

cc: CMSP Contact Persons

LMF:lr
CHSB-3070
a/rf

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IMPORTANT INFORMATION ABOUT YOUR
COUNTY MEDICAL SERVICES PROGRAM (CMSP)
CARD AND BENEFITS

PLEASE UNDERSTAND THAT CMSP IS NOT THE MEDI-CAL PROGRAM.

You will receive a CMSP card each month you are certified as eligible for CMSP.

MISUSE OF YOUR CMSP CARD COULD RESULT IN A REDUCTION OF YOUR BENEFITS, TERMINATION OF YOUR ELIGIBILITY, AND/OR PROSECUTION AS A MISDEMEANOR (TITLE 22, CAC, SECTION 50733(d)).

Some persons eligible for CMSP have a share of cost obligation. If you have a share of cost, you must pay, or agree to pay, part of your monthly income toward your medical expenses before you can receive a CMSP card. You will receive a card only after you have met your share of cost. Your county worker will explain how this works.

Once you have received your card, you should always carry it with you. Your card may be used only by you to receive the following medical care:

- Acute inpatient hospital care
- Laboratory and radiology services
- Home health agency services
- Outpatient heroin detoxification services
- Physical therapy
- Prosthetic and orthotic appliances
- Pharmaceutical services provided by licensed pharmacists
- Medical supplies dispensed by physicians, licensed pharmacists, or durable medical equipment dealers, and prosthetic and orthotic providers
- Emergency ambulance services and medically necessary transportation from the acute hospital to other facilities for medically necessary specialized or tertiary care
- Limited dental services (treatment of oral and maxillo-facial fractures and dislocations, and dental alveolar abscesses when performed by an oral surgeon)
- Physician's services
- Blood and blood derivatives
- Chronic hemodialysis services
- Hospital outpatient and outpatient clinic services
- Durable medical equipment

You will be required to pay \$1.00 for medication prescriptions and \$3.00 for emergency room visits which are not emergencies.

There is no limit on the amount of medical care listed above which you may receive with your CMSP card. However, many of these services may have to be approved by CMSP consultants before they are given. Your doctor or other provider must request such approval from the State Department of Health Services. (Note: local Medi-Cal field offices approve treatment requests for CMSP services except for dental services.)

If you need or desire medical care which is not covered by CMSP, then you must pay for it yourself or make other arrangements with the provider.

You should always carry your CMSP card with you. In an emergency, obtain medical care immediately even if you do not have your card with you. Remember, however, to tell the provider that you are covered by CMSP and show the provider your card as soon as possible after you have received care.

You should retain your CMSP card for at least two months, as your providers may need to photocopy the card and use the photocopy to bill CMSP.

REMEMBER: the person or facility providing medical care *does not have* to accept the CMSP card. Find out if the provider accepts the card *before* you go for treatment. It is your responsibility to provide the card at the time you receive medical care. CMSP payments to your provider are payment in full for the services which you receive.

PERCENT OF CMSP ELGIBLES TO TOTAL CMSP POPULATION

	JULY 1984 CMSP ELIGIBLES	PERCENT OF TOTAL CMSP POPULATION	MAXIMUM ORDER
Alpine	2	0.0152%	500
Amador	107	0.8131%	500
Butte	998	7.5836%	2000
Calaveras	122	0.9271%	500
Colusa	116	0.8815%	500
Del Norte	179	1.3602%	500
El Dorado	468	3.5562%	1000
Glenn	147	1.1170%	500
Humboldt	1,174	8.9210%	2000
Imperial	980	7.4468%	2000
Inyo	148	1.1246%	500
Kings	552	4.1945%	1000
Lassen	204	1.5502%	1000
Madera	656	4.9848%	2000
Marin	1,037	7.8799%	2000
Mariposa	124	0.9422%	500
Modoc	126	0.9574%	500
Mono	24	0.1824%	500
Napa	530	4.0274%	1000
Nevada	436	3.3131%	1000
Plumas	114	0.8663%	500
San Benito	127	0.9650%	500
Sierra	40	0.3040%	500
Siskiyou	315	2.3936%	1000
Solano	1,278	9.7112%	3000
Sonoma	1,599	12.1505%	3000
Sutter	532	4.0426%	1000
Trinity	89	0.6763%	500
Tuolumne	206	1.5653%	1000
Yuba	730	5.5471%	2000
Tota	13,160	100.0000%	33,000